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FORM D UNITED STATES OMB APPROVAL SECURITIES AND EXCHANGE COMMISSION OMB Number: 3235-0076 Washington, D.C. 20549 Expires: May 31, 2005 2003 Estimated average burden FORM D hours per response.....16.00 OTICE OF SALE OF SECURITIES SEC USE ONLY Prefix PURSUANT TO REGULATION D. SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Filing Under (Check box(es) that apply): Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Rationalwave Onshore Equity Fund, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 230 Park Avenue, Suite 928, New York, New York 10169 (646) 227-5252 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business 222092 Securities investment fund managed by general partner and designees. Type of Business Organization corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed MAR 0 7 2003 Year Actual or Estimated Date of Incorporation or Organization: 10131 TOT 1 Actual | Estimated

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

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CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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A-BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a c	• •
Each executive officer and director of corporate issuers and of corporate general and managing partners of pa	thership issuers; and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Rationalwave Capital Partners, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code) 230 Park Avenue, Suite 928, New York, New York 10169	
Check Box(es) that Apply: X Promoter X Beneficial Owner X Executive Officer X Director	General and/or Managing Partner
Full Name (Last name first, if individual) Rosenblatt, Mark N.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
230 Park Avenue, Suite 928, New York, New York 10169	
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) Grimmer, Richard C.	:
Business or Residence Address (Number and Street, City, State, Zip Code) 230 Park Avenue, Suite 928, New York, New York 10169	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	·
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

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1.	Has the	issuer sole	d, or does t	he issuer i	ntend to se	II. to non-a	ccredited i	nvestors ir	this offer	ing?		Yes □	No [X]
•	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							ш					
2.	•								\$ 1,0	* 000,000			
		* Subje	ct to waiv	er.								Yes	No
3.			permit join										
4.	commis If a pers or state	sion or sim son to be lis s, list the na	tion request ilar remune sted is an ass ame of the b you may s	ration for s sociated pe roker or d	solicitation erson or age ealer. If me	of purchasent of a broker ore than five	ers in conne ter or deale e (5) persor	ection with r registered as to be list	sales of se d with the S ed are asso	curities in t SEC and/or	he offering with a state	;	
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, Z	(ip Code)						
Nar	ne of As	sociated Bi	roker or De	aler									
Stat			Listed Has										
	(Check	"All States	s" or check	individual	States)		••••••	***************************************		****		_ Al	l States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	ividual)						_			
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nar	ne of As	sociated Br	oker or De	aler									
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					-	
			or check							•• •• • • • • • • • • • • • • • • • • •		☐ Al	l States
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Ful	Name (Last name	first, if indi	ividual)							-		
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, I	Zip Code)						
Nan	ne of Ass	sociated Br	oker or De	aler									
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers			•••	· · · · · · · · · · · · · · · · · · ·		
	(Check	"All States	" or check	individual	States)			••••				☐ Ai	l States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
		Aggregate Offering Price	Ar	nount Already Sold
	Debt\$	0	\$	0
	Equity\$	0	\$	0
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	0	\$	0
	Partnership Interests Class A, Class B and Class C	250,000,000	\$	0
	Other (Specify)\$		\$	0
	Total\$		\$	0
	Answer also in Appendix, Column 3, if filing under ULOE.		-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		ollar Amount of Purchases
	Accredited Investors		\$_	0
	Non-accredited Investors		\$_	0
	Total (for filings under Rule 504 only)	NA	\$_	NA
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
		Type of	D	ollar Amount
	Type of Offering	Security NA		Sold
	Rule 505		\$_	NA NA
	Regulation A	NA NA	\$_	NA NA
	Rule 504		\$_	
	Total	NA	\$_	NA
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	0
	Printing and Engraving Costs	🗵	\$	1,000
	Legal Fees	X	\$	3,000
	Accounting Fees		\$	0
	Engineering Fees		\$	0
	Sales Commissions (specify finders' fees separately)		\$	0
2.	Other Expenses (identify)blue sky filing fees	X	\$	3,000
	Total		\$	7,000

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	2. C. OFFERINGPRICE, NUM	BER OF INVESTIORS, EXPENSES AND USE O	FPROCE	DDS 4.2		11:50	
and	Enter the difference between the aggregate offer total expenses furnished in response to Part C—ceeds to the issuer."	Question 4.a. This difference is the "adjusted gr	oss		<u>\$</u> 249	,993,000	
eac che	licate below the amount of the adjusted gross protein of the purposes shown. If the amount for an eck the box to the left of the estimate. The total of seeds to the issuer set forth in response to Part	ly purpose is not known, furnish an estimate a f the payments listed must equal the adjusted gro	ınd				
			O Dire	ments to fficers, ectors, &	•	ements to	
Sal	aries and fees		🔼 💲	*	\$	0	
Pu	rchase of real estate		🔲 💲	0	\$	0	
Pu: and	rchase, rental or leasing and installation of mac	hinery	🔲 \$	0	. 🗆 \$	0	
	nstruction or leasing of plant buildings and faci				 \$	0	
off	quisition of other businesses (including the valuering that may be used in exchange for the assesser pursuant to a merger)	ets or securities of another	🗌 \$	0	. 🗆 \$	0	
Re	payment of indebtedness		🗷 💲 🛂	3,000	\$	0	
Wo	orking capital		🔲 💲	0	. ⊠\$ <u>_</u> 2	249,950,000	
Oti	ner (specify):		_ 🗆 \$	-	\$		
_			_ 	0	\$	0	
Co	lumn Totals		X] \$4	3,000	区\$_2	49,950,000	
	al Payments Listed (column totals added)				9,993,000		
		D. FEDERAL SIGNATURE					
ignatuı	ter has duly caused this notice to be signed by the constitutes an undertaking by the issuer to furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Com	mission, u	pon writte			
ssuer (Print or Type)	Signature A A	Date	<u> </u>	~		
Ratio	nalwave Onshore Equity Fund, L.P.	VV an IV- of RINCLES	3	3-0	<u> </u>		
Iamaa	f Signer (Print or Type)	Title of Signer (Print or Type)					
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The general partner and its assignees will receive a quarterly cash fee in an amount up to one-fourth of 1.5% of partner capital account balances, which will be reduced by one-third for aggregate account balances in excess of \$150,000,000 and an annual incentive profit allocation of up to 20% for Class A, 17% for Class B and 15% for Class C of realized and unrealized limited partner capital account appreciation. The Issuer will reimburse the General Partner up to \$50,000 for organizational and initial offering expenses.

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)